

## State Health Benefit Plan - Monthly Premium Rates - January 1, 2010

Active Employee & Employees on FMLA/Disability/Military Leave w/o Pay	EE	EE & CH	EE & SP	EE & SP & CH
United Healthcare OAP	\$94.70	\$268.10	\$278.50	\$289.10
United Healthcare OAP Tobacco	\$154.70	\$328.10	\$338.50	\$349.10
United Healthcare OAP Spouse	NA	NA	\$318.50	\$329.10
United Healthcare OAP Tobacco & Spouse	NA	NA	\$378.50	\$389.10
United Healthcare HMO	\$100.20	\$227.60	\$236.50	\$245.40
United Healthcare HMO Tobacco	\$160.20	\$287.60	\$296.50	\$305.40
United Healthcare HMO Spouse	NA	NA	\$276.50	\$285.40
United Healthcare HMO Tobacco & Spouse	NA	NA	\$336.50	\$345.40
United Healthcare HRA	\$62.50	\$185.30	\$191.00	\$196.60
United Healthcare HRA Tobacco	\$122.50	\$245.30	\$251.00	\$256.60
United Healthcare HRA Spouse	NA	NA	\$231.00	\$236.60
United Healthcare HRA Tobacco & Spouse	NA	NA	\$291.00	\$296.60
United Healthcare HDHP	\$54.40	\$171.40	\$176.50	\$181.60
United Healthcare HDHP Tobacco	\$114.40	\$231.40	\$236.50	\$241.60
United Healthcare HDHP Spouse	NA	NA	\$216.50	\$221.60
United Healthcare HDHP Tobacco & Spouse	NA	NA	\$276.50	\$281.60
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<b>Education, Employee/Employer Convenience Leave w/o Pay or Suspension w/o Pay</b>	<b>EE</b>	<b>EE &amp; CH</b>	<b>EE &amp; SP</b>	<b>EE &amp; SP &amp; CH</b>
United Healthcare OAP	\$450.87	\$811.56	\$1,037.00	\$1,262.43
United Healthcare OAP Tobacco	\$510.87	\$871.56	\$1,097.00	\$1,322.43
United Healthcare OAP Spouse	NA	NA	\$1,077.00	\$1,302.43
United Healthcare OAP Tobacco & Spouse	NA	NA	\$1,137.00	\$1,362.43
United Healthcare HMO	\$362.93	\$653.27	\$834.73	\$1,016.19
United Healthcare HMO Tobacco	\$422.93	\$713.27	\$894.73	\$1,076.19
United Healthcare HMO Spouse	NA	NA	\$874.73	\$1,056.19
United Healthcare HMO Tobacco & Spouse	NA	NA	\$934.73	\$1,116.19
United Healthcare HRA	\$389.72	\$701.50	\$896.36	\$1,091.22
United Healthcare HRA Tobacco	\$449.72	\$761.50	\$956.36	\$1,151.22
United Healthcare HRA Spouse	NA	NA	\$936.36	\$1,131.22
United Healthcare HRA Tobacco & Spouse	NA	NA	\$996.36	\$1,191.22
United Healthcare HDHP	\$338.81	\$609.86	\$779.27	\$948.68
United Healthcare HDHP Tobacco	\$398.81	\$669.86	\$839.27	\$1,008.68
United Healthcare HDHP Spouse	NA	NA	\$819.27	\$988.68
United Healthcare HDHP Tobacco & Spouse	NA	NA	\$879.27	\$1,048.68
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CIGNA OAP Tobacco	\$510.87	\$871.56	\$1,097.00	\$1,322.43
CIGNA OAP Spouse	NA	NA	\$1,077.00	\$1,302.43
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